

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 1 OF 6
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Citizens United Political Victory Fund		FEC IDENTIFICATION NUMBER ▼ C C00295527
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name of Payee Doug Wallick		Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 27 / 2014
Mailing Address 13608 Wendover Road		Amount 900.00
City Silver Spring	State MD	Zip Code 20904
Purpose of Expenditure Television ad production - grip and lighting. Ad supports Sam Clovis and airs May 27th to June 3rd.		Transaction ID : B496971 Date of Disbursement or Obligation MM / DD / YYYY 05 / 20 / 2014
Name of Federal Candidate Samuel Clovis		Category/Type 004
<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: IA
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶
57670.04		

Full Name of Payee Telescript DC Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 27 / 2014
Mailing Address 4938 Hampden Lane #348		Amount 406.00
City Bethesda	State MD	Zip Code 20814
Purpose of Expenditure Television ad production - teleprompter. Ad supports Sam Clovis and airs May 27 to June 3rd.		Transaction ID : B496973 Date of Disbursement or Obligation MM / DD / YYYY 05 / 20 / 2014
Name of Federal Candidate Samuel Clovis		Category/Type 004
<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: IA
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶
57670.04		

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	1306.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Kevin Allen

[Electronically Filed]

Date

MM / DD / YYYY
05 / 28 / 2014

Signature